## NOTIFICATION OF MULTICANDIDATE STATUS

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(See reverse side for instructions) [ 1 10 Ep | 0 p This form should be filed after the Committee qualities as a multicandidate committee. 9-60 (415-30.4) \$101) 1600 Be 1. (a) NAME OF COMMITTEE IN FULL District No. 1 PCD, MZBA Jan 3 16 10 M '94 Political Action Fund (b) Number and Street Address 2. FEC IDENTIFICATION NUMBER 444 North Capitol Street, NW Suite 800 C-00279380 (c) Oty. State and ZIP Code 3. TYPE OF COMMITTEE (check one) ■ STATE PARTY Washington, DC 20001 TOTHER I certify that **one** of the following situations is correct (complete line 4 or 5): STATUS BY AFFILIATION: The committee submitted its Statement of Organization (FEC FORM 1) on January 6, 1993 and simultaneously qualified as a multicandidate committee through its attiliation with: Committee Name: District No. 1 MEBA/NMU POLITICAL ACTION FUND FEC Identification Number: <u>C-00002022</u> STATUS BY QUALIFICATION: (a) Candidates: The committee has made contributions to the five (5) federal candidates listed below (ONLY State party committees may leave this blank): Office Sought Name State/District Date (i) (ii) an (lv) (V) (b) Contributors: The committee received a contribution from its 51st contributor. (c) Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: \_ (d) Qualification: The committee met the above requirements on: I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. TYPE OR PRINT NAME OF TREASURER SIGNATURE OF TREASURER DATE 12/30/93 Joel E. Bem NOTE: Submission of false, erroneous, or incomplete igformation rhay subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

> For further information contact: Federal Election Commission, Washington, DC 20483 Toll-free 800-424-9530 Local 202-219-3420

FEC FORM 1M

## Federal Election Commission

## FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received. DATE OF RECEIPT Hand Delivered POSTMARKED First Class Mail 12-30-93 POSTMARKED Registered/Certified Mail No Postmark Postmark Illegible DATE OF RECEIPT Received from the House Office of Records and Registration DATE OF RECEIPT Received from the Senate Office of Public Records POSTMARKED Other (Specify): and/or DATE OF RECEIPT PREPARER

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